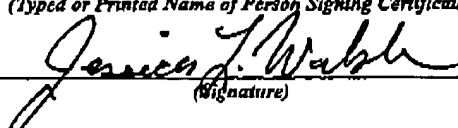
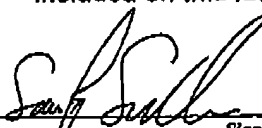


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): EDDY BENJAMIN BOSKAMP ET AL.			Docket No. 121134
Application No. 10/063,223	Filing Date 04/01/2002	Examiner L. ARANA	Group Art Unit 2859
Invention: MULTIPLE CHANNEL, MICROSTRIP TRANSCEIVER VOLUME ARRAY FOR MAGNETIC RESONANCE IMAGING			
<div style="text-align: right;">RECEIVED CENTRAL FAX CENTER FEB 11 2005</div>			
I hereby certify that this <u>Transmittal and Amendment</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>) on <u>02/11/2005</u> (Date)			
<div style="text-align: center;"><u>Jessica L. Walsh</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</div>			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 121134									
Applicant(s): EDDY BENJAMIN BOSKAMP ET AL.														
Application No. 10/063,223	Filing Date 04/01/2002	Examiner L. ARANA	Customer No. 23413	Group Art Unit 2859	Confirmation No. 9508									
Invention: MULTIPLE CHANNEL, MICROSTRIP TRANSCEIVER VOLUME ARRAY FOR MAGNETIC RESONANCE IMAGING														
<u>COMMISSIONER FOR PATENTS:</u>														
Transmitted herewith is an amendment in the above-identified application.														
The fee has been calculated and is transmitted as shown below.														
CLAIMS AS AMENDED														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	21 -	26 =	0	x \$50.00	\$0.00									
INDEP. CLAIMS	4 -	5 =	0	x \$200.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 07-0845 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
 _____ Signature			Dated: February 11, 2005											
Sean F. Sullivan Reg. No. 38,328 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 860-286-2929			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</td> </tr> <tr> <td colspan="2" style="text-align: center;">(Date)</td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____		(Date)		_____ Signature of Person Mailing Correspondence		_____ Typed or Printed Name of Person Mailing Correspondence	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____														
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	EDDY BENJAMIN BOSKAMP, ET AL.)	
)	Group Art Unit: 2859
Serial No.:	10/063,223)	
)	
Filed:	April 1, 2002)	Examiner: Arana, L.
)	
For:	MULTIPLE CHANNEL, MICROSTRIP)	
	TRANSCIVER VOLUME ARRAY FOR)	Confirmation No.: 9508
	MAGNETIC RESONANCE IMAGING)	

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In response to the Office Action mailed November 15, 2004, please amend the
Application as follows: